Report run on: March 1, 2023 8:04:33 AM EST Version 6.0

*** WARNING *** Sensitive information may be displayed on this report. *** WARNING ***

User Selection Criteria

Handler ID: FLD980711071

Display All or Current: All

Report Results

Number of Sites: 1 Number of Pages: 6

Report Description

This report will provide a comprehensive view of all financial assurance information by Cost Estimate. Note: Mechanism and Mechanism Details that are not linked to a Cost Estimate will NOT be displayed on this report. Note: Cost Estimates and Mechanism Details that are the current data are denoted by a double asterisk (**). For the Cost Estimate, the double asterisks are next to the "Cost Estimate" label; for the Mechanism Detail, the double asterisks are next to the Mechanism Detail Sequence Number.

Last Updated On: 11/12/2021

March 1, 2023 8:04:33 AM EST

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Page 2

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List of Handler Univers	se Abbreviations
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Very Small Quantity Generator (VSQG), or Not a Generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
IC / EC in Place	Indicates that the facility has Institutional Controls / Engineering Controls in place. ('Y' indicates that the facility is in the respective universe).
EL Indicator (HE/GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Permit Progress	Indicates that the facility is part of the Permitting/Closure/Post-Closure Progress universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
Permit Workload	Indicates that the facility is part of the Permit Workload universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
Closure Workload	Indicates that the facility is part of the Closure Workload universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
Post-Closure Workload	Indicates that the facility is part of the Post-Closure Workload universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
Renewals Workload	Indicates that the facility is part of the Permit Renewals Workload universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment, H - SWM)
GPRA Permits	Indicates that the facility is part of the GPRA Permit universe. ('+' indicates that the facility is on the GPRA Permit Baseline and meeting the goal; '-' indicates that the facility is on the GPRA Permit Baseline)
GPRA Renewals	Indicates that the facility is part of the GPRA Renewals universe. ('+' indicates that the facility is on the GPRA Renewals Baseline and meeting the goal; '-' indicates that the facility is on the GPRA Renewals Baseline and not meeting the goal; 'N' indicates that the facility is not on the GPRA Renewals Baseline)
Subject to CA	Indicates that the facility is part of the Subject to Corrective Action universe. ('Y' indicates that the facility is in this universe)
Subj CA TSD 3004	Indicates that the facility is a Treatment, Storage or Disposal facility Potentially Subject to Corrective Action Under 3004(u)/(v). ('Y' indicates that the facility is in this universe)
Subj CA TSD Discr	Indicates that the facility is a Treatment, Storage or Disposal facility Subject to Corrective Action Under Discretionary Authorities. ('Y' indicates that the facility is in this universe)
Subj CA Non-TSD	Indicates that the facility is a Non-Treatment, Storage or Disposal facility where Corrective Action has been imposed. ('Y' - the facility is in this universe)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' - the facility is in this universe)
GPRA CA 2020	Indicates that the facility is part of the GPRA Corrective Action universe ('Y' - the facility is in this universe)

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FLORIDA

REGION 04

PERM/	A-FIX OF FLORIDA INC	County Name/Code: ALACHUA / FL001
Location	1040 NW 67TH PL GAINESVILLE FL 32653-1640	

FLD980711071

Location	1940 INVV 07 TH PL, GAINESVILLE, PL 32033-1049							
	Latitude: 29.719234	Longitude -82.351116						
Mailing:	1940 NW 67TH PL GAIN	ES\/IIIE EL 32653-1649						

ricinity Locality	on: FL		State Distri	ct: NE	N	on-Notifier:	Ex	tract Flag: Y	Activ	ve Site: Y
Generator: Permit Progress: Permit Workload: Closure Workload:	LQG \$ \$	Pos	nsporter: t-Closure ewals Workload:	Y 	Operating TS Subject to CA Subj CA TSD Subj CA TSD	A: Y 0 3004: Y	IC/EC In Plac Subj CA Non CA Workload	-TSD: N	El Indicator (HE / 0 GPRA CA 2020: GPRA Permit: GPRA Renewals:	GW): +/+ Y N +
cost Estimate**	Seq 12	Agency S - STATE	Date 09/01/2022	Amount \$2,000,000.00	Resp Person FL - ERE	Financial Assurance T S - SUDDEN THIRD-PA		<mark>son</mark> IABILITY COVERAGE F	REQUIRED	Update Due 09/01/2023
Mech. S Provi	ider: INDIAN	HARBOR INSU E,STAMFORD,	Agenc JRANCE COMPAN CONNECTICUT 0	y : S - STATE Y, 70 SEAVIEW 6902	Contac	De: I-INSURANCE Ct: MR. ANTHONY GENT III: ANTHONY.GENTIL@#			Phor	ne: 203-964-5200
	Detail Se	q ID				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
	1**	PEC00444	5408			S - STATE	09/01/2022		\$2,000,000.00	\$2,000,000.0
ost Estimate**	Seq	Agency	Date	Amount	Resp Person	Financial Assurance 1	Гуре Reas	son		Update Due
	11	S - STATE	02/28/2022	\$4,016,459.00	FL - ERE	C - Closure	A - II	NFLATION ADJUSTED		02/28/2023
Mech. S	Seq: 7		Agenc	y: S - STATE	Tvn	e: I-INSURANCE				
		ECIALTY INSUI DRK, NEW YOF	RANCE COMPANY	·		ct: MR. RICHARD DAVIE	S		Phor	ne: 770-671-2169
		ORK, NEW YOF	RANCE COMPANY	·			S Effective Date	Expiration Date	Phor Facility Face Value	
	NEW YO	ORK, NEW YOF	RANCE COMPANY	·		ct: MR. RICHARD DAVIE		Expiration Date		Total Face Value
	NEW YO	ORK, NEW YOF	RANCE COMPANY	, 175 WATER STI		ct: MR. RICHARD DAVIE	Effective Date 02/28/2022	•	Facility Face Value	Total Face Value \$4,016,459.00 Update Due
Provi	Detail Se	ORK, NEW YOF eq ID 1959168	RANCE COMPANY RK 10038	, 175 WATER STI	REET, Contact	Ct: MR. RICHARD DAVIES Agency S - STATE	Effective Date 02/28/2022 Type Reas	•	Facility Face Value \$4,016,459.00	Total Face Value \$4,016,459.00
Provi	Detail Se 1** Seq 10 Seq: 6 ider: INDIAN	PORK, NEW YOR 1959168 Agency S - STATE HARBOR INSU	PANCE COMPANY RK 10038 Date 09/01/2021	Amount \$2,000,000.00 y: S - STATE Y, 70 SEAVIEW	RESP Person FL - ERE Typ	Agency S - STATE Financial Assurance 1	Effective Date 02/28/2022 Type Reas ARTY L - L	son	Facility Face Value \$4,016,459.00 REQUIRED	Total Face Valu \$4,016,459.0
Provi Cost Estimate Mech. S	Detail Se 1** Seq 10 Seq: 6 ider: INDIAN	eq ID 1959168 Agency S - STATE HARBOR INSU	Date 09/01/2021 Agenc JRANCE COMPANY	Amount \$2,000,000.00 y: S - STATE Y, 70 SEAVIEW	RESP Person FL - ERE Typ	Agency S - STATE Financial Assurance 1 S - SUDDEN THIRD-PAGE: I-INSURANCE	Effective Date 02/28/2022 Type Reas ARTY L - L	son	Facility Face Value \$4,016,459.00 REQUIRED	Total Face Value \$4,016,459.00 Update Due

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*** WARNING *** Sensitive information may be displayed on this report. *** WARNING ***

FLORIDA	\									REGION 04
PERMA-F	FIX OF FLOR	IDA INC -	continued						F	LD980711071
Cost Estimate	te Seq	Agency	Date	Amount	Resp Person	Financial Assura	nce Type Rea	ason		Update Due
	9	S - STATE	02/28/2021	\$3,968,833.00	FL - ERE	C - Closure	A -	INFLATION ADJUSTED		
		ECIALTY INSUI DRK, NEW YOR	RANCE COMPANY	y : S - STATE ⁄, 175 WATER STI		ype: I-INSURANCE tact: MR. RICHARD D	AVIES		Pho	one: 770-671-2169
	Detail Se	eq ID				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
	1**	1959168				S - STATE	02/28/2021		\$3,968,833.00	\$3,968,833.00
Cost Estimate	te Seq	Agency	Date	Amount	Resp Person	Financial Assura	nce Type Rea	ason		Update Due
	8	S - STATE	09/01/2020	\$2,000,000.00	FL - ERE	S - SUDDEN THI	RD-PARTY L -	LIABILITY COVERAGE R	EQUIRED	
		E, STAMFORD				ype: I-INSURANCE tact: MS. MARY ANN				one: 203-964-5200
	Detail Se	•				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
	1**	PEC00444	5406			S - STATE	09/01/2020		\$2,000,000.00	\$2,000,000.00
Cost Estimate		Agency	Date		Resp Person	Financial Assura		ason		Update Due
	7	S - STATE	02/28/2020	\$3,902,491.00	FL - ERE	C - Closure	A -	INFLATION ADJUSTED		
		ECIALTY INSUI DRK, NEW YOR	RANCE COMPANY	y: S - STATE ⁄, 175 WATER STI		ype: I-INSURANCE tact: MR. RICHARD D	AVIES		Pho	one: 770-671-2169
	Detail Se	eq ID				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
	1**	1959168				S - STATE	02/28/2020		\$3,902,491.00	\$3,902,491.00
Cost Estimate	te Seq	Agency	Date	Amount	Resp Person	Financial Assura	nce Type Rea	ason		Update Due
	6	S - STATE	09/01/2019	\$2,000,000.00	FL - ERE	S - SUDDEN THI	RD-PARTY L -	LIABILITY COVERAGE R	EQUIRED	
			Agenc JRANCE COMPAN , CONNECTICUT (ype: I-INSURANCE tact: MS. MARY ANN	SUSAVIDGE		Pho	one: 800-327-1414
	Detail Se	eq ID				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
	2**									

Quick report

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*** WARNING *** Sensitive information may be displayed on this report. *** WARNING ***

LORIDA										
PERMA-FIX	OF FLOR	IDA INC -	continued						F	LD98071107
Cost Estimate	Seq	Agency	Date	Amount	Resp Person	Financial Assura	nce Type Rea	son		Update Due
	5	S - STATE	02/28/2019	\$3,818,484.00	FL - ERE	C - Closure	A - I	NFLATION ADJUSTED		
		ECIALTY INSUI DRK, NEW YOR	RANCE COMPAN	c y: S - STATE Y, 175 WATER STF		/pe: I-INSURANCE act: MR. RICHARD D/	AVIES		Pho	one: 770-671-2169
	Detail Se	eq ID				Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Valu
	1**	1959168				S - STATE	02/28/2019		\$3,818,484.00	\$3,818,484.0
Cost Estimate	Seq	Agency	Date	Amount	Resp Person	Financial Assura	nce Type Rea	son		Update Due
	4 Notes: L	S - STATE IABILITY INSUI	09/01/2018 RANCE	\$2,000,000.00	FL - ERE	S - SUDDEN THIR	D-PARTY L - L	IABILITY COVERAGE F	REQUIRED	
Mech.	vider: INDIAN	HARBOR INSU	JRANCE COMPAI	NY, 70 SEAVIEW	Cont	act: MS. MARY ANN S	SUSAVIDGE		Pho	one: 800-327-1414
	AVENUE	E, STAMFORD	JRANCE COMPAI , CONNECTICUT		Cont		SUSAVIDGE Effective Date	Expiration Date		
		E, STAMFORD	, CONNECTICUT		Cont	act: MS. MARY ANN S Agency S - STATE		Expiration Date	Facility Face Value	Total Face Valu
Pro	AVENUI	E, STAMFORD	, CONNECTICUT	06902	Cont	Agency	Effective Date 09/01/2019			Total Face Valu \$2,000,000.0
Pro	AVENUE Detail Se 2**	E, STAMFORD PEC00444	, CONNECTICUT 15405	06902	Resp Person	Agency S - STATE	Effective Date 09/01/2019 nce Type Rea		Facility Face Value	Total Face Valu \$2,000,000.0
Professional Profe	AVENUE Detail Se 2** Seq 3 a. Seq: 1 ovider: AIG SPE	eq ID PEC00444 Agency S - STATE	, CONNECTICUT 15405 Date 02/28/2018 Ageneration	06902 Amount	Resp Person FL - ERE	Agency S - STATE Financial Assura	Effective Date 09/01/2019 nce Type Rea A - I	son	Facility Face Value \$2,000,000.00	Total Face Valu \$2,000,000.0 Update Due
Profost Estimate Mech.	AVENUE Detail Se 2** Seq 3 a. Seq: 1 ovider: AIG SPE	eq ID PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOR	, CONNECTICUT 15405 Date 02/28/2018 Ageneration	Amount \$3,750,967.00 by: S - STATE	Resp Person FL - ERE	Agency S - STATE Financial Assurat C - Closure ype: I-INSURANCE	Effective Date 09/01/2019 nce Type Rea A - I	son	Facility Face Value \$2,000,000.00	Total Face Valu \$2,000,000.0 Update Due 02/28/2019 one: 770-671-2169
Professional Profe	Detail Se 2** Seq 3 a. Seq: 1 ovider: AIG SPE NEW YO	eq ID PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOR	, CONNECTICUT 15405 Date 02/28/2018 Ageneration	Amount \$3,750,967.00 by: S - STATE	Resp Person FL - ERE	Agency S - STATE Financial Assurat C - Closure /pe: I-INSURANCE act: MR. RICHARD D/	Effective Date 09/01/2019 nce Type Rea A - I	son NFLATION ADJUSTED	Facility Face Value \$2,000,000.00	Total Face Valu \$2,000,000.0 Update Due 02/28/2019 one: 770-671-2169 Total Face Valu
Production	Detail Se 2** Seq 3 Seq: 1 ovider: AIG SPE NEW YO	eq ID PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOR eq ID 1959168 Agency	, CONNECTICUT 15405 Date 02/28/2018 Ageneration	Amount \$3,750,967.00 cy: S - STATE Y, 175 WATER STF	Resp Person FL - ERE	Agency S - STATE Financial Assurat C - Closure /pe: I-INSURANCE act: MR. RICHARD D/ Agency S - STATE Financial Assurat	Effective Date 09/01/2019 nce Type Rea A - I AVIES Effective Date 02/28/2019 nce Type Rea	son NFLATION ADJUSTED Expiration Date	Facility Face Value \$2,000,000.00 Pho Facility Face Value \$3,818,484.00	Total Face Valu \$2,000,000.0 Update Due 02/28/2019 one: 770-671-2169 Total Face Valu \$3,818,484.0
ost Estimate Mech. Pro	Detail Se 2** Seq 3 3. Seq: 1 ovider: AIG SPE NEW YO Detail Se 1**	eq ID PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOR 1959168	Date 02/28/2018 Agen RANCE COMPAN	Amount \$3,750,967.00 cy: S - STATE Y, 175 WATER STF	Resp Person FL - ERE Ty REET, Cont	Agency S - STATE Financial Assurat C - Closure /pe: I-INSURANCE act: MR. RICHARD D/ Agency S - STATE	Effective Date 09/01/2019 nce Type Rea A - I AVIES Effective Date 02/28/2019 nce Type Rea	son NFLATION ADJUSTED Expiration Date	Facility Face Value \$2,000,000.00 Pho Facility Face Value \$3,818,484.00	Total Face Valu \$2,000,000.0 Update Due 02/28/2019 one: 770-671-2169 Total Face Valu \$3,818,484.0
Provide Sost Estimate Mech. Provide Sost Estimate Mech.	AVENUE Detail Se 2** Seq 3 a. Seq: 1 Evider: AIG SPE NEW YO Detail Se 1** Seq 2 a. Seq: 2 Evider: INDIAN	eq ID PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOR eq ID 1959168 Agency S - STATE	Date 02/28/2018 Agene RANCE COMPAN RK 10038 Date 09/01/2016	Amount \$3,750,967.00 cy: S - STATE Y, 175 WATER STE Amount \$2,000,000.00 cy: S - STATE NY, 70 SEAVIEW	Resp Person FL - ERE TYREET, Cont Resp Person FL - ERE	Agency S - STATE Financial Assurat C - Closure /pe: I-INSURANCE act: MR. RICHARD D/ Agency S - STATE Financial Assurat	Effective Date 09/01/2019 nce Type Rea A - I AVIES Effective Date 02/28/2019 nce Type Rea D-PARTY L - L	son NFLATION ADJUSTED Expiration Date	Facility Face Value \$2,000,000.00 Pho Facility Face Value \$3,818,484.00	Total Face Valu \$2,000,000.0 Update Due 02/28/2019 one: 770-671-2169 Total Face Valu \$3,818,484.0
Cost Estimate Mech. Prov	AVENUE Detail Se 2** Seq 3 a. Seq: 1 Evider: AIG SPE NEW YO Detail Se 1** Seq 2 a. Seq: 2 Evider: INDIAN	E, STAMFORD PEC00444 Agency S - STATE ECIALTY INSUIDRK, NEW YOF PAGE ID 1959168 Agency S - STATE HARBOR INSUE E, STAMFORD	Date 09/01/2016 Date 01/2016 Date 09/01/2016	Amount \$3,750,967.00 cy: S - STATE Y, 175 WATER STE Amount \$2,000,000.00 cy: S - STATE NY, 70 SEAVIEW	Resp Person FL - ERE TYREET, Cont Resp Person FL - ERE	Agency S - STATE Financial Assuran C - Closure /pe: I-INSURANCE act: MR. RICHARD D/ Agency S - STATE Financial Assuran S - SUDDEN THIR /pe: I-INSURANCE	Effective Date 09/01/2019 nce Type Rea A - I AVIES Effective Date 02/28/2019 nce Type Rea D-PARTY L - L	son NFLATION ADJUSTED Expiration Date	Facility Face Value \$2,000,000.00 Pho Facility Face Value \$3,818,484.00	Total Face Value \$2,000,000.00 Update Due 02/28/2019 one: 770-671-2169 Total Face Value \$3,818,484.00 Update Due

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*** WARNING *** Sensitive information may be displayed on this report. *** WARNING ***

FLORIDA	REGION 04
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PERMA-FIX OF FLORIDA INC - continued							
Cost Estimate	Seq	Agency	Date	Amount Resp Person	Financial Assurance Type	Reason	Update Due
	1	S - STATE	09/01/2008	\$3,702,830.00 FL - ERE	C - Closure	A - INFLATION ADJUSTED	

1 S - STATE 09/01/2008 \$3,702,830.00 FL - ERE C - Closure

1 Agency: S - STATE Type: I-INSURANCE

 Mech. Seq: 1
 Agency: S - STATE
 Type: I-INSURANCE

 Provider: AIG SPECIALTY INSURANCE COMPANY, 175 WATER STREET,
 Contact: MR. RICHARD DAVIES

 Phone: 770-671-2169

NEW YORK, NEW YORK 10038

Detail Seq	ID	Agency	Effective Date	Expiration Date	Facility Face Value	Total Face Value
1**	1959168	S - STATE	02/28/2019		\$3,818,484.00	\$3,818,484.00

*** End of Report ***